

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

FISCHER FOR CONGRESS

ADDRESS (number and street)

123 SARATOGA RD. PMB 410

- (Check if address is changed)

GLENNVILLE

CITY

NY

STATE

12302

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

- (Check if address is changed)

FISCHER4CONGRESS@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

- (Check if address is changed)

WWW.FISCHERFORCONGRESS.COM

2. DATE 01 / 03 / 2014

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer STACY J. FANTAUZZI

Signature of Treasurer

Date

01 / 03 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
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